

**ARIZONA FORM
120ES****Corporation Estimated Tax Payment****2001**

Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079

NOTE: *To ensure proper application of this payment, this form must be completed in its entirety.*This estimated payment is for taxable year ending MM / DD / YYYY**Check box if:** This is the first year you are filing a tax return under this name and FEIN ☐Name, address, or FEIN has changed ☐ If FEIN has changed, list prior number _____The enclosed amount
is payment number

Name of firm - exactly as it will appear on the return		Federal employer identification number (FEIN)
Address - <i>number and street, PO Box</i>		For DOR use only
City	State ZIP code	
You must round your estimated payment to a whole dollar (no cents).		
PAYMENT ENCLOSED \$ _____ .00		
Make check payable to: Arizona Department of Revenue		

ADOR 06-0027 (00)

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